

MULTIPLE DEPENDENT
M
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

APPLICANT(S)

91545172

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT					
	IND.	DEP.	IND.	DEP.	IND.	DEP.				
1							51			
2							52			
3							53			
4							54			
5							55			
6							56			
7							57			
							58			
							59			
							60			
							61			
							62			
							63			
							64			
							65			
							66			
							67			
							68			
							69			
							70			
							71			
							72			
							73			
							74			
							75			
							76			
							77			
							78			
							79			
							80			
							81			
							82			
							83			
							84			
							85			
							86			
							87			
							88			
							89			
							90			
							91			
							92			
							93			
							94			
							95			
							96			
							97			
							98			
							99			
							100			
TOTAL IND.	10						TOTAL IND.			
TOTAL DEP.	7	7	7	7	7	7	TOTAL DEP.	7	7	7
TOTAL CLAIMS	19						TOTAL CLAIMS			

Best Available Copy